

SMART BUSINESS PRACTICES

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Making the Basic Pilot Work for Your Business

Section 401 of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA - Public Law 104-208) required the federal government to establish pilot programs to verify the employment eligibility of new hires.

Participation in the Basic Pilot Program is voluntary and has been available for every business in the country since late 2004.

Step 1 - Under the Basic Pilot Program, an employer who elects to participate signs a Memorandum of Understanding (click here to learn more about this) with the Social Security Administration and the (now) Department of Homeland Security (DHS) that spells out the responsibilities of each party. Then, when an employer hires a new employee, he first satisfies current law by having the employee fill out an I-9 form within three business days of hire.

The I-9 simply states the employee's name, date of birth, social security number, and an attestation that the employee is a United States citizen, lawful permanent resident, or alien authorized to work in the U.S. The employee presents to the employer either one document establishing both identity and work authorization (e.g., a U.S. passport or green card) or two documents that together establish identity and work authorization (e.g., a driver's license and a social security card). The employer examines them to make sure they reasonably appear to be valid (i.e., the photo is not taped on the driver's license) and records the document number, issuing agency and expiration date, if any, on the I-9. Then, the employer signs an attestation on the I-9 saying that he has examined the documents and they appear valid.



Step 2 - Once the I-9 is done, the employer logs onto a secure DHS website, enters the employee's full name, date of birth and social security number. He chooses from a drop-down box which document/combination of documents the employee presented, and then clicks the submit button. The information about the employee is transmitted immediately to the SSA (Social Security Administration).

Step 3 - If the SSN (social security number) and the name match SSA records, the employer receives a message within two or three seconds that the employee is authorized to work and the process is finished.

If the SSN and name match, but the SSA cannot verify that the employee is work authorized (i.e., the SSN may have been issued "not for employment purposes") the employer gets a message that DHS is attempting to verify work authorization. DHS usually responds within 24 hours, but the law gives it three days, since it has to check its records by hand if the automated check does not match the name and immigration document. If DHS finds a match, it tells the employer and the process is finished. Otherwise, the employer is told to have the employee check with DHS directly to clear up the problem.

To Hire or Not to Hire - If the SSN and name do not match, the employer receives a message to refer the employee to SSA to clear up the problem.

In either case where the employee is referred to SSA/DHS, the employer will be notified within 10 days that either work authorization is confirmed or not confirmed, in which case the employer must terminate the employee.

Employment Eligibility Verification

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. **ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.		I attest, under penalty of perjury, that I am (check one of the following):	
		<input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien #) A _____ <input type="checkbox"/> An alien authorized to work until ____/____/____ (Alien # or Admission #) _____	
Employee's Signature			Date (month/day/year)

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State, Zip Code)	
Date (month/day/year)	

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): ____/____/____		____/____/____		____/____/____
Document #: _____		_____		_____
Expiration Date (if any): ____/____/____		____/____/____		____/____/____

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) ____/____/____ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name	Address (Street Name and Number, City, State, Zip Code)	Date (month/day/year)

Section 3. Updating and Reverification. To be completed and signed by employer.

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.	
Document Title: _____	Document #: _____ Expiration Date (if any): ____/____/____

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Date (month/day/year)
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LISTS OF ACCEPTABLE DOCUMENTS

LIST A

Documents that Establish Both Identity and Employment Eligibility

1. U.S. Passport (unexpired or expired)
2. Certificate of U.S. Citizenship
(Form N-560 or N-561)
3. Certificate of Naturalization
(Form N-550 or N-570)
4. Unexpired foreign passport, with I-551 stamp or attached Form I-94 indicating unexpired employment authorization
5. Permanent Resident Card or Alien Registration Receipt Card with photograph (Form I-151 or I-551)
6. Unexpired Temporary Resident Card (Form I-688)
7. Unexpired Employment Authorization Card (Form I-688A)
8. Unexpired Reentry Permit
(Form I-327)
9. Unexpired Refugee Travel Document (Form I-571)
10. Unexpired Employment Authorization Document issued by DHS that contains a photograph (Form I-688B)

OR

LIST B

Documents that Establish Identity

1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address
 2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address
 3. School ID card with a photograph
 4. Voter's registration card
 5. U.S. Military card or draft record
 6. Military dependent's ID card
 7. U.S. Coast Guard Merchant Mariner Card
 8. Native American tribal document
 9. Driver's license issued by a Canadian government authority
- For persons under age 18 who are unable to present a document listed above:**
10. School record or report card
 11. Clinic, doctor or hospital record
 12. Day-care or nursery school record

AND

LIST C

Documents that Establish Employment Eligibility

1. U.S. social security card issued by the Social Security Administration (*other than a card stating it is not valid for employment*)
2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)
3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
4. Native American tribal document
5. U.S. Citizen ID Card (Form I-197)
6. ID Card for use of Resident Citizen in the United States (Form I-179)
7. Unexpired employment authorization document issued by DHS (*other than those listed under List A*)

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
SAVE Program

Report Prepared: 03/16/2007
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Case Verification Number: [REDACTED]

Initial Verification:

Last Name:		First Name:	
Middle Initial:		Maiden Name:	
Social Security Number:		Date of Birth:	
Hire Date:		Citizenship Status:	Citizen or National of the United States
Alien Number:		I-94 Number:	
Document Type:	List B, C Documents	Doc. Expiration Date:	
Initiated By:	MBEV7997	Initiated On:	03/16/2007

Initial Verification Results:

Last Name:		First Name:	
Initial Eligibility:	EMPLOYMENT AUTHORIZED		

SSA Referral:

Referral By:		Referral Date:	
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SSA Resubmittal:

Last Name:		First Name:	
Middle Initial:		Maiden Name:	
Social Security Number:		Date of Birth:	
Initiated By:		Initiated On:	

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:	
Initiated By:	Initiated On:

Verification Response:

Eligibility:	Response Date:
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DHS Referral:

Referral By:	Referral Date:
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DHS Referral Results:

Eligibility:	Response Date:
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Case Resolution:

Resolve Option:	
Resolved By:	Resolved On:

SENSITIVE BUT UNCLASSIFIED